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March 16, 2004

GROUP: 1623

FAX NUMBER: 1-703-872-9306

ATTORNEY DOCKET NO.: ISPH-0769

SERIAL NO.: 10/653,528

FILED: September 2, 2003

NUMBER OF PAGES: 9
(including this sheet)

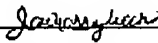
MESSAGE: Attached is an Amendment Transmittal Letter (in duplicate)
and a Preliminary Amendment.

URGENT! PLEASE DELIVER IMMEDIATELY UPON RECEIPT. THANK YOU!

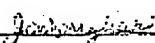
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AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. ISPH-0769	
Applicant(s): Monia and Dobie					
Serial No. 10/653,528	Filing Date September 2, 2003	Examiner Not yet assigned		Group Art Unit 1623	
Invention: ANTISENSE MODULATION OF HISTONE DEACETYLASE 2 EXPRESSION					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	13 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
 <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1619 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
<div style="text-align: right;"> _____ Signature</div>			Dated: March 16, 2004		
Jane Massey Licata Reg. No. 32,257 Licata & Tyrrell P.C. 66 E. Main Street Marlton, NJ 08053 Tel: 856-810-1515 Fax: 856-810-1454			<div>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div> <div style="border-top: 1px solid black; height: 20px; margin-top: 10px;"></div> <div style="text-align: center; font-size: small;">Signature of Person Mailing Correspondence</div> <div style="border-top: 1px solid black; height: 20px; margin-top: 10px;"></div> <div style="text-align: center; font-size: small;">Typed or Printed Name of Person Mailing Correspondence</div>		
cc:					

P11LARGE/REV08

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Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1619 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div><div style="text-align: right;">Dated: March 16, 2004</div></div> <div style="margin-top: 20px;"><div style="display: flex; justify-content: space-between;"><div> _____ Signature Jane Massey Licata Reg. No. 32,257 Licata & Tyrrell P.C. 66 E. Main Street Marlton, NJ 08053 Tel: 856-810-1515 Fax: 856-810-1454</div><div style="border: 1px solid black; padding: 5px; width: 40%; text-align: center;"><p>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p><hr/><p>Signature of Person Mailing Correspondence</p><hr/><p>Typed or Printed Name of Person Mailing Correspondence</p></div></div></div>					
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No.: ISPH-0769
Inventors: Monia and Dobie
Serial No.: 10/653,528
Filing Date: September 2, 2003
Examiner: Not yet assigned
Group Art Unit: 1623
Title: Antisense Modulation of Histone
Deacetylase 2 Expression

Certificate of Facsimile Transmission

I hereby certify that this paper is being facsimile
transmitted to the Patent and Trademark Office on
the date shown below.

On March 18, 2004

Jane Massey
Jane Massey Licata Registration No. 32,257

Commissioner for Patents
Washington, DC 20231

Preliminary Amendment

Claims 1-13 are pending in this application. Please enter
the following amendments and remarks into the record.

The Amendments to the Claims are reflected in the listing of
claims which begins on page 2.

Remarks begin on page 5.